

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	h. A		02/30/01
O.I.P.E. CLASSIFIER		48	8/7/01
FORMALITY REVIEW	YG	456	08/31/01
RESPONSE FORMALITY REVIEW	CA	333	1/28/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	0
15	✓
16	0
17	0
18	✓
19	0
20	0
21	0
22	✓
23	0
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	0
38	✓
39	0
40	0
41	✓
42	0
43	0
44	0
45	✓
46	0
47	0
48	0
49	0
50	0

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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